

July 05, 2016

Tom Moe
USS Corporation
P.O. Box 417
8771 Park Ridge Dr
Mountain Iron, MN 55768

RE: Project: NPDES-LINE 3 Wkly
Pace Project No.: 1268919

Dear Tom Moe:

Enclosed are the analytical results for sample(s) received by the laboratory on June 22, 2016. The results relate only to the samples included in this report. Results reported herein conform to the most current TNI standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Melisa M Woods
melisa.woods@pacelabs.com
Project Manager

Enclosures

cc: Cory Hertling
Terri Sabetti, NTS



REPORT OF LABORATORY ANALYSIS

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CERTIFICATIONS

Project: NPDES-LINE 3 Wkly

Pace Project No.: 1268919

Virginia Minnesota Certification ID's

315 Chestnut Street, Virginia, MN 55792

Alaska Certification #MN01084

Arizona Department of Health Certification #AZ0785

Minnesota Dept of Health Certification #: 027-137-445

North Dakota Certification: # R-203

Wisconsin DNR Certification # : 998027470

WA Department of Ecology Lab ID# C1007

Nevada DNR #MN010842015-1

Oklahoma Department of Environmental Quality

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SAMPLE SUMMARY

Project: NPDES-LINE 3 Wkly

Pace Project No.: 1268919

Lab ID	Sample ID	Matrix	Date Collected	Date Received
1268919001	WS-002 Scrubber Make-Up	Water	06/22/16 08:45	06/22/16 17:00
1268919002	WS-003 Thickner Overflow	Water	06/22/16 08:35	06/22/16 17:00

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SAMPLE ANALYTE COUNT

Project: NPDES-LINE 3 Wkly

Pace Project No.: 1268919

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
1268919001	WS-002 Scrubber Make-Up	EPA 200.7	MAR	3	PASI-V
		EPA 300.0	CSD	1	PASI-V
1268919002	WS-003 Thickner Overflow	EPA 200.7	MAR	3	PASI-V
		EPA 300.0	CSD	1	PASI-V

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ANALYTICAL RESULTS

Project: NPDES-LINE 3 Wkly

Pace Project No.: 1268919

Sample: WS-002 Scrubber Make-Up Lab ID: 1268919001 Collected: 06/22/16 08:45 Received: 06/22/16 17:00 Matrix: Water									
Parameters	Results	Units	Report Limit	MDL	DF	Prepared	Analyzed	CAS No.	Qual
200.7 MET ICP, Lab Filtered Analytical Method: EPA 200.7 Preparation Method: EPA 200.7									
Calcium, Dissolved	92.4	mg/L	5.0	0.29	10	06/27/16 14:40	06/28/16 11:45	7440-70-2	
Magnesium, Dissolved	184	mg/L	5.0	0.67	10	06/27/16 14:40	06/28/16 11:45	7439-95-4	
Total Hardness, Dissolved	988	mg/L	100	50.0	10	06/27/16 14:40	06/28/16 11:45		
300.0 IC Anions 28 Days Analytical Method: EPA 300.0									
Sulfate	696	mg/L	20.0	10.0	10		06/28/16 20:05	14808-79-8	

Sample: WS-003 Thickner Overflow Lab ID: 1268919002 Collected: 06/22/16 08:35 Received: 06/22/16 17:00 Matrix: Water									
Parameters	Results	Units	Report Limit	MDL	DF	Prepared	Analyzed	CAS No.	Qual
200.7 MET ICP, Lab Filtered Analytical Method: EPA 200.7 Preparation Method: EPA 200.7									
Calcium, Dissolved	459	mg/L	5.0	0.29	10	06/27/16 14:40	06/28/16 11:48	7440-70-2	
Magnesium, Dissolved	281	mg/L	5.0	0.67	10	06/27/16 14:40	06/28/16 11:48	7439-95-4	
Total Hardness, Dissolved	2300	mg/L	100	50.0	10	06/27/16 14:40	06/28/16 11:48		
300.0 IC Anions 28 Days Analytical Method: EPA 300.0									
Sulfate	1810	mg/L	40.0	20.0	20		06/28/16 20:26	14808-79-8	

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QUALITY CONTROL DATA

Project: NPDES-LINE 3 Wkly

Pace Project No.: 1268919

QC Batch: MPRP/7179

Analysis Method: EPA 200.7

QC Batch Method: EPA 200.7

Analysis Description: 200.7 MET Dissolved

Associated Lab Samples: 1268919001, 1268919002

METHOD BLANK: 335960

Matrix: Water

Associated Lab Samples: 1268919001, 1268919002

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Calcium, Dissolved	mg/L	ND	0.50	0.029	06/28/16 11:02	
Magnesium, Dissolved	mg/L	ND	0.50	0.067	06/28/16 11:02	

LABORATORY CONTROL SAMPLE: 335961

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Calcium, Dissolved	mg/L	50	50.2	100	85-115	
Magnesium, Dissolved	mg/L	50	50.2	100	85-115	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 335962

335963

Parameter	Units	1268920003 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Calcium, Dissolved	mg/L	30.8	50	50	81.7	82.4	102	103	70-130	1	20	
Magnesium, Dissolved	mg/L	114	50	50	164	164	99	100	70-130	0	20	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 335964

335965

Parameter	Units	1268920004 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Calcium, Dissolved	mg/L	57.1	50	50	108	108	102	103	70-130	0	20	
Magnesium, Dissolved	mg/L	151	50	50	200	203	98	103	70-130	1	20	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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QUALITY CONTROL DATA

Project: NPDES-LINE 3 Wkly

Pace Project No.: 1268919

QC Batch: WETA/17482

Analysis Method: EPA 300.0

QC Batch Method: EPA 300.0

Analysis Description: 300.0 IC Anions

Associated Lab Samples: 1268919001, 1268919002

METHOD BLANK: 336831

Matrix: Water

Associated Lab Samples: 1268919001, 1268919002

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Sulfate	mg/L	ND	2.0	1.0	06/28/16 18:43	

LABORATORY CONTROL SAMPLE: 336832

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Sulfate	mg/L	50	51.1	102	90-110	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 336833 336834

Parameter	Units	1269119001 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Sulfate	mg/L	8.3	50	50	59.6	60.0	103	103	90-110	1	20	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 336835 336836

Parameter	Units	1268975001 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Sulfate	mg/L	10.3	250	250	263	264	101	102	90-110	1	20	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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QUALIFIERS

Project: NPDES-LINE 3 Wkly

Pace Project No.: 1268919

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

LABORATORIES

PASI-V Pace Analytical Services - Virginia

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: NPDES-LINE 3 Wkly

Pace Project No.: 1268919

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
1268919001	WS-002 Scrubber Make-Up	EPA 200.7	MPRP/7179	EPA 200.7	ICP/5298
1268919002	WS-003 Thickner Overflow	EPA 200.7	MPRP/7179	EPA 200.7	ICP/5298
1268919001	WS-002 Scrubber Make-Up	EPA 300.0	WETA/17482		
1268919002	WS-003 Thickner Overflow	EPA 300.0	WETA/17482		

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CHAIN-OF-CUSTODY / Analytical Request Document
The Chain-of-Custody is a LEGAL DOCUMENT

Section A

Required Client Information:

Company: USS Corporation
Address: P.O. Box 417
Mt. Iron, MN 55768
Email:
Phone:
Fax:
Requested Due Date:

Section B

Required Project Information:

Report To: Tom Moe
Copy To:
Purchase Order #:
Project Name: NPDES-LINE 3 WWY
Project #:

Section C

Invoice Information:

Attention:
Company Name:
Address:
Pace Quote:
Pace Project Manager: heather.zika@pacelabs.com
Pace Profile #:


PM: MMW
Due Date: 07/07/16
CLIENT: USS CORP


1 of 1

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 / -) Sample ids must be unique	MATRIX Drinking Water Water Waste Water Product Soil/Solid Oil Wipes Air Other Tissue	CODE DW WT WW P SL OL WP AR DT TS	COLLECTED				SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives							Analyses Test	Y/N	LAB FILTERED: SO4	Lab FILTERED: Ca,Mg,Hard	Residual Chlorine (Y/N)	LF,LF																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
				START	END	DATE	TIME			Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol							Other																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	DATE	TIME	DATE	TIME																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										</

PRINT Name of SAMPLER: Thomas A. Moe
SIGNATURE of SAMPLER: [Signature]
DATE Signed: 6/22/16

TEMP in C: 5.7
Received on Ice (Y/N): Y
Custody Sealed Cooler (Y/N): N
Samples Intact (Y/N): Y

	Document Name:	Document Revised: 23Feb2015
	Sample Condition Upon Receipt Form	Page 1 of 1
	Document No.: F-VM-C-001-Rev.09	Issuing Authority: Pace Virginia, Minnesota Quality Office

Sample Condition Upon Receipt	Client Name:	Project #:	WO#: 1268919  1268919
	Courier: <input type="checkbox"/> Fed Ex <input type="checkbox"/> UPS <input type="checkbox"/> USPS <input checked="" type="checkbox"/> Client <input type="checkbox"/> Commercial <input type="checkbox"/> Pace <input type="checkbox"/> Other:		
Tracking Number:			

Custody Seal on Cooler/Box Present? ☐ Yes ☒ No
 Seals Intact? ☐ Yes ☒ No
 Optional: Proj. Due Date: Proj. Name:

Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☒ None ☐ Other:
 Temp Blank? ☒ Yes ☐ No

Thermometer Used: ☒ 140792808
 Type of Ice: ☒ Wet ☐ Blue ☐ None ☒ Samples on ice, cooling process has begun

Cooler Temp Read °C: 5.4
 Cooler Temp Corrected °C: 5.7
 Biological Tissue Frozen? ☐ Yes ☐ No ☒ N/A

Temp should be above freezing to 6°C
 Correction Factor: 0.3
 Date and Initials of Person Examining Contents: CA 6-23-16

Chain of Custody Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name and Signature on COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.
Short Hold Time Analysis (<72 hr)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered Volume Received for Dissolved Tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved containers.
Sample Labels Match COC?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes Date/Time/ID/Analysis Matrix: <u>WT</u>		
All containers needing acid/base preservation will be checked and documented in the pH logbook.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	See pH log for results and additional preservation documentation
Headspace in Methyl Mercury Container	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
Headspace in VOA Vials (>6mm)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Trip Blank Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Custody Seals Present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

CLIENT NOTIFICATION/RESOLUTION

Person Contacted: _____ Date/Time: _____

Comments/Resolution: _____

Field Data Required? ☐ Yes ☐ No

FECAL WAIVER ON FILE Y N
 TEMPERATURE WAIVER ON FILE Y N

Project Manager Review: CRG for MIMM
 Date: 6/23/16

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers)